2 H Dr. J. France Com Il

The test of the state of the st

Turkers it may consum.

It great well to me or some the entitier of some neighbor to expression the first and the for Lesket to move the transfer of the the areas of the the arrange of the the arrange of the the arrange of the disappearent of the arrange of the disappearent of the arrange of the arr

It is present in and the second experiently and in the present the present the present the present the present the region of the present the region to make and major house the region to make an employer a property of the region of the present the region to make the region of the present the region of th

That right, that plane in the hour of the sund of the

Liver wan Atre bright

98N-1265

C 5295

To the FDA:

RE: DOCKET NO. 98N-1265

I send this letter as a consumer of healthcare services to register my concern and disapproval of the Memorandum of Understanding as published by the FDA on January 21, 1999.

In its present form, the MOU, as well as the Compounding Section 503A of the Modernization Act, severely restricts the rights of the physicians and patients to obtain healthcare products from the provider of their choice. It also infringes on the rights of compounding pharmacists to serve the public's medical needs. As a healthcare consumer, there should be no restrictions to the delivery of a compounded medication prescribed for me, regardless of where I may live or may travel. The MOU must be amended!

The FDA is an agency of the U.S. Government that purports to be the "watchdog" for consumer safety. THIS IS NOT A SAFETY ISSUE!! As a governmental agency, the FDA also has a responsibility to be accountable to the people. Once again, the MOU must be amended!

Signed:	. 12.	<u> </u>
State of Residence:		

Tel. No.:





0000



Day of Delivery    Day of Delivery   Flat Rate Envelope   Delivery Attempt   Time   Employee Signature	
Next Second Postage Delivery Attempt Time Employee Signature	
12 Noon 3 PM C Mo. Day AM PM	
Year Military Return Receipt Fee Mo. Day Time Employee Signature	
Mo. Day AM PM	
lut! Alpha Country Code Caraffee Insurance Fee Sujnature of Addressee or Agent	
Marine - Please Print	
As ceptance Clerk Initials Total Positive 1 663	
R USE ONLY	
LE A CLAIM FOR DAMAGE OR LOSS  NTENTS, YOU MUST PRESENT THE  CLE, CONTAINER, AND PACKAGING  HE USPS FOR INSPECTION.  WAIVER OF SIGNATURE (DOMESTIC PROBLEM) Sugnature of addressee or addressee or addressee's agent that article can be left in secure location) and I authorize that delivery employee's signature of addressee or addressee or addressee or addressee or addressee or addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee or addressee or addressee or addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee or addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee. No Delivery to be made without obtaining signature of addressee or addressee.	re constitutes valid proof of
LEASE PRINT) PHONE ( )	7
EASE PRINT)	
T T	
ESSEPTION TO THE PROPERTY OF T	
ASE PRINTI	
T F	
T T	
esserving)	

FOR PICKUP OR TRACKING CALL 1-000



Label 11-B. July 1997